with its evolution, as well as of the views of the Surgeon-General, United States Navy, on the subject. In point of fact, the amended Boyd bill, to which the president of the Spanish-American War Nurses refers, hung itself. The army had nothing whatever to do with it. During a conversation with Surgeon-General Rixey on the subject he remarked to me that the proposed bill was "not at all what he wanted"—if for no other reason than that it would never go through because it would result in a disorganization of the Army Nurse Corps. This he naturally would not permit.

The bill was then entirely rewritten by Admiral Rixey himself,—according to his own ideas,—based on the Army Nurse Corps statute. All the army had to do with it was to offer some suggestions at his request. Several points which we want some day to get for the army nurses were left untouched, hoping the navy nurses might be fortunate enough to get them—notably allowing the nurses' leave to become cumulative. We certainly did not grudge our navy sisters any good thing which could be secured for them, and so far from trying to kill the bill, all the weight of whatever influence the army could command was thrown in the scale for and not against it. How could it have been otherwise, when it is remembered that a large number of the members of the Army Nurse Corps are Spanish-American War nurses as well, and the Army Nurse Corps is not a "house divided against itself"?

Superintendent Army Nurse Corps.

BROOKLINE, MASS., October 21, 1903.

AMERICAN JOUENAL OF NURSING.

DEAR EDITOR: My attention has been called to your editorial in the September number of the Journal entitled "The Medical Attitude," the text for which is furnished by an article of mine in the Boston Medical and Surgical Journal on "The Need of an Institution for the Education of Nurses Independent of the Hospitals."

You find my ignorance of the efforts which nurses are making to bring about the establishment of a preliminary course of training characteristic of the attitude of medical men as a whole, and you also imply that the article does injustice to those nurses who for a number of years have been trying to carry out such a plan. May I be allowed to say a word in explanation of the article in question?

At the time it was written I knew that the subject of preliminary training was in the minds of a number of persons interested in the education of nurses, but I had never seen anything written on the subject to which I might refer. My object in writing in a medical journal was to bring to the attention of medical men the "need of an institution" to give this preliminary training, because, as I stated, the movement must have the coöperation of the hospitals, which are largely in the control of physicians. I wished especially to point out the advantages that that system would have for the small hospitals.

I was much surprised to read in a representative nurses' journal that I "must have been taking a long nap" not to know that the scheme is an old one, and also that I "enter the field seemingly as an interloper, stealing the thunder of the nurse to whom should be accorded the credit of one of the most brilliant schemes for nursing advancement yet conceived."

I regret very much that I had not seen Miss Davis's valuable article in The American Journal of Nursing on the "Central School Idea for Preliminary Instruction to Nurses," and I am sincerely glad to have this opportunity to acknowledge it.

I am sorry if any injustice has been done to those members of the nursing profession who have been doing so much to secure a course of preliminary training in Boston. It does not seem possible, however, that any credit of originality for the idea of preliminary training in an independent institution could be given to me, especially when previous to the publication of my article it is announced that just such courses are to be established in a number of different places.

While my ignorance may be, as you say, characteristic of the medical profession, I do not believe that the apparent spirit and tone of your editorial represents the nurses' "attitude." FRANCIS P. DENNY.

[We think Dr. Denny has given an unjust interpretation of our editorial comment on "The Medical Attitude" in the September number, and we quote the paragraph in full in which we made our meaning as to the attitude of the medical profession very clear, and in which we feel that we have expressed fairly the "nurses' attitude:"

"First let us say that our experience and observation would seem to prove that the masses of medical men concern themselves very little about nursing matters. They are liberal in their attitude, willing to grant every privilege of personal or organized effort to nurses in the management of their own affairs, asking only that capable, well-trained nurses shall be provided to take care of their patients. This liberal attitude has been proved by the action of the medical organizations that gave their support to the nurses of North Carolina, Illinois, Virginia, and New York in their recent successful legislation. It would be impossible for the great body of the medical profession to keep in touch with nursing progress in all of its detail, but we do expect the few physicians who interest themselves in nursing matters to keep themselves informed of what is being done by nurses, by hospitals, and by educational institutions along all the lines of nursing progress, whether for better theoretical instruction, more thorough technical training, or upon the lines of what is known as preliminary training."

Our criticism is unmistakably a criticism of a few individual men, and not of the medical profession as a body, as Dr. Denny's letter infers.--Ep.]

[LETTERS to the Editor must be accompanied by the name in full and address of the writer, otherwise such communications cannot be recognized. The name need not appear in the JOURNAL unless so desired.—Ed.]



Dr. W. S. Christopher, of Chicago, recommends the following method of treating earache in children, and I presume it would relieve larger ears as well. Wring a fruit-napkin out of boiling water, place it in an ordinary drinking-glass, and hold the child's ear over the top of the glass tightly, so that it may be penetrated by the steam. This gives greater relief than any external application of heat or the introduction of warm oil, and is a cleaner method than the latter.